## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN												
_			(Column 1)		(Column 2)			TYPE		OR	OTHER THA	
TOTAL CLAIMS			35				ŀ	RATE	FEE	]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			36 minus 20=		· /b			X\$ 9=		OR	X\$18=	288
	DEPENDENT C			nus 3 =		//		X43=		OR	X86=	alp
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT			<u>Ø</u>		+145=		OR	+290=	20,0
* If the difference in column 1 is less than zero, enter "0" in column 2						•	TOTAL		OR	TOTAL	2294	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	- 36	Minus	** 3	6	= <i>D</i>		X\$ 9=		OR	X\$18=	1
AME	Independent	* 14 ENTATION OF MI	Minus	###	<u>(4</u>	<u>                                     </u>	4	X43=		OR	X86=	
ب	FINOT PRESE	ENTATION OF ME	DETIPLE DEP	ENDENT	CEAN		' [	+145=-		OR	+290=	
							_	TOTAL		OR	TOTAL ADDIT. FEE	
ADDIT. FEE												
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MQN	Total	•	Minus	eretr		=	$\prod$	X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM	<u> </u>	1	+145=		OR	+290=	·
							L	TOTAL		OR .	TOTAL	
		(Column 1)		(Colum	n 2)	(Column 3)	~	DOTT. FEE L			ADDIT. FEE <b>L</b>	
<b>3</b>	`	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOL PAID F	ST ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		<u>.</u>		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		8		X43=			X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	7.00-	
		d to 4						+145=		OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20.  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEE										OR A	TOTAL DDIT. FEE	
		ber Previously Paid					r found	in the appr	opriate box			